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367.39020X00  
PAT 99417US/NC 24369 US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Mika KIVIMAKI  
Serial No.: 09/656,225  
Filed: September 6, 2000  
For: USER INTERFACE FOR TEXT  
TO SPEECH CONVERSION  
Art Unit: 2654  
Examiner: Kinari M. Patel

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AMENDMENT

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

January 15, 2004

Sir:

This is in response to the Office Action of July 21, 2003. Please amend the above-identified application as listed below and as set forth on the following pages:

Amendments to the Specification and Abstract

Amendments to the Claims

Remarks are included following the amendments

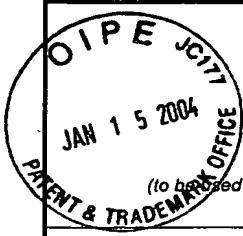
2654

PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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## TRANSMITTAL FORM

*(to be used for all correspondence after initial filing)*

Total Number of Pages in This Submission

Application Number	09/656,225
Filing Date	September 6, 2000
First Named Inventor	Mika KIVIMAKI
Group Art Unit	2654
Examiner Name	Kinari M. Patel
Attorney Docket Number	367.39020X00

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Reply (15 pgs.) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group ( <i>Appeal Notice, Brief, Reply Brief</i> ) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <i>Substitute Specification (17 pgs.) and Marked Sub. Specification (18 pgs.)</i>
Remarks		

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### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	ANTONELLI, TERRY, STOUT & KRAUS, LLP
Signature	DONALD E. STOUT, REG. NO. 26, 422
Date	January 15, 2004

### CERTIFICATE OF TRANSMISSION/MAILING

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Signature		Date	January 15, 2004

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